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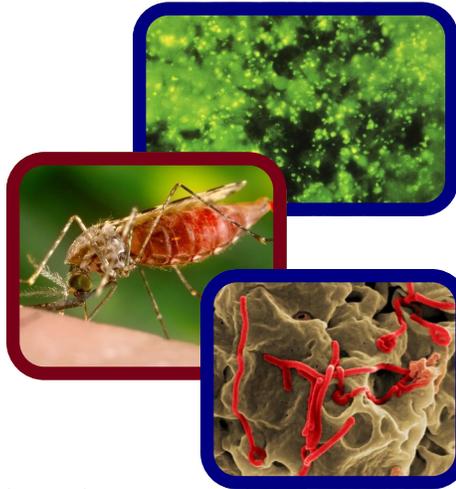
2015 LRN Workshop Series: Outbreak Response

**Presented by the Tennessee Department of Health
Division of Laboratory Services**

Course Description

The Laboratory Response Network (LRN) workshop is a full day course that covers a variety of topics. This year's topics were specially selected from the many suggestions made by laboratorians last summer across the state.

As the course has been designed for Clinical Laboratory Scientists who work in Tennessee, they are given admission preference.



Workshop Topics

- Ebola
- Chikungunya
- Anti-Vaccination Movement
- Biosafety
- Brucella /Francisella
- Recent Outbreak Responses (Legionella, Salmonella, Enterovirus D-68, Norovirus)
- Emerging Technology

Presented 8:00 AM-4:00 PM Local Time

Wednesday, June 24
Johnson City
North East Regional Health Office (Warehouse)

Thursday, June 25
Knoxville
Knox County Health Department

Thursday, July 9
Cookeville
Upper Cumberland Regional Health Office

Thursday, July 23
Chattanooga
Southeast Regional Health Office

Tuesday, August 11
Nashville
Mid-Cumberland Regional Health Office

Wednesday August 12
Nashville
Mid-Cumberland Regional Health Office

Wednesday, August 26
Memphis
St. Francis Hospital

Thursday, August 27
Jackson
Jackson Madison County Health Department

**6.5 Contact
Hours of
Continuing
Education Credit
for State
Licensure
Requirements!**

**Tennessee Department of Health
Division of Laboratory Services**

**630 Hart Lane
Nashville, TN 37243
Phone: 615-262-6355
Fax: 615-262-6360**



Please Note: Your e-mail address is what we use to track your application and participation in the workshop. Be sure to use the same e-mail address in all forms relating to your workshop participation. This e-mail will also be our primary means of communication with you. If you do not have an e-mail address, please provide a telephone number at which you may be reached during weekday business hours. Please provide the requested information, fill out the application clearly and mail or fax to the information above. You may also e-mail the scanned form to: labworkshopapps.health@tn.gov

**Applicant
Information**

*Required Fields

*Name (First & Last):		*E-Mail Address:	
Facility Name (Please Spell Out):		*Daytime Phone:	
Facility Address:		Fax Number:	
Number Suite #	Street	*What is Your Job Title?	
City	State	Zip Code	*MT/MLT TN State License Number:

Select One Date from the Classes/Locations Below:

- | | | | |
|------------------------------|-----------------------------|-----------------------------|-------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Wed, June 24
Johnson City | Thurs, June 25
Knoxville | Thurs, July 9
Cookeville | Thurs, July 23
Chattanooga |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tues, Aug. 11
Nashville | Wed, Aug. 12
Nashville | Wed, Aug. 26
Memphis | Thurs, Aug. 27
Jackson |